Company Number:				
Cooperative Electric Indu Operator Statement	-			
6 P 6 1 6 1 6 1 1 1 1 1 1 1 1 1 1				
Company Name:				
THE OF THE SERVICE OF				
Under the penalties of perjury, I hereby certify that this statement has my direction and supervision from the original books and records of s				
facts, statements, and schedules in this statement are true, correct, a				
of my knowledge.				
Signature	Date			
Printed name and title	Telephone number			

COMPANY INFORMATION

Appraisal Tax Representative

Representative (This person will receive the appraisal and all appraisal correspondence.)						
Title						
Mailing Address						
Address Line 1						
Address Line 2						
City	State		Zip Code			
Country (if not in the U.S.)		Federal Emple	oyer Identification Number			
E-Mail Address						
Telephone Number	Fax Num		Number			
Mapping and Tax Code Area Representative Representative (This person will receive the tax code area mapping information.)						
Title	Title					
E-Mail Address						
		le v				
Telephone Number	elephone Number		Fax Number			
Tax Bill Representative						
Representative (This person will receive the tax bill.)						
Title						
E-Mail Address						
Telephone Number	elephone Number Fax Number					

GENERAL INSTRUCTIONS

1. This statement and additional documentation apply to the calendar year ending December 31, 2010. You must submit this information to the Idaho State Tax Commission by April 30, 2011.

Centrally Assessed Property Section Property Appraisal Bureau Idaho State Tax Commission P O Box 36 Boise, ID 83722

- 2. Answer all questions and attach additional sheets where necessary. If you cannot provide the information, briefly explain why.
- 3. If the space provided is insufficient, insert additional pages. You may use photocopies or computer-generated pages.
- 4. Please submit any additional information that may affect the valuation of the property.
- 5. Include the following additional reports: the annual report to partners and stockholders, operating, and financial year-end company reports.
- 6. The taxpayer or an authorized agent must provide all information requested by the Idaho State Tax Commission. The taxpayer must provide correct and reliable information. If the requested information is not provided, the Tax Commission will assess the property as fairly and equitably as possible using the best information it possesses. The taxpayer will have no right to appeal such assessment. See Idaho Code section 63-404 and IDAPA Rule 35.01.03.404.06.

If you have any questions about completing this form, please call our office at (208) 334-7722.

F	INANCIAL AND STA	TISTICAL INFORMA	ATION	
Gross Earnings Received from	all Energy Sales in Idaho			
(Less) WPPSS 4 and 5 Costs				
(Less) Cost of Power				
Adjusted Gross Earnings				
Total sales of electric energy to Idaho	furnish power for irrigation or drainage pu	mping purposes on lands in the state of		
	MILEAGE I	NFORMATION	_	
	petical order and tax code area numbers alform Tax Code Area System as prescri cessary.)			
County (List in alpha order.)	Tax Code Area Number (List in numerical order within county.) (One total per code area per county) 1	Mileage Carried to Two Decimal Places		
		Transmission	Distribution	
	·			

¹ Please put counties in alphabetical order and the tax code areas in numerical order. Please list only one total per tax code area.